



DEPARTMENT OF THE NAVY
NAVAL AMPHIBIOUS BASE LITTLE CREEK
2600 TARAWA COURT SUITE 100
NORFOLK, VIRGINIA 23521-3297

IN REPLY REFER TO:

NAVPHIBASELCREEK/
REGPUBSAFETYINST 1330.1
N01
10 FEB 2003

NAVPHIBASELCREEK/REGPUBSAFETY INSTRUCTION 1330.1

Subj: ELECTRONIC PROCESSING OF SPECIAL REQUEST CHITS

Ref: (a) OPNAVINST 11103.1 Series
(b) COMNAVREGMIDLANT/SOPA (ADMIN) HRINST 7431.1 Series

Encl: (1) Special Request Chit Routing Matrix
(2) Sample Print-out of Electronic Chit (NAVPERS Form 1336/3)
(3) Sample Page 13 for Counseling on Financial Responsibility

1. Purpose. To promulgate enclosure (1) for the information of Naval Amphibious Base Little Creek (NAVPHIBASE LCREEK)/Regional Public Safety (REGPUBSAFETY) Staff.

2. Background. U.S. Navy Regulations specifically direct requests submitted by Naval personnel are to be acted upon promptly and when addressed to higher authority, forwarded without delay. The Special Request/Authorization (NAVPERS 1336/3) is the most common means for Naval personnel to communicate their requests to the chain of command. The timely and thorough consideration of the requests of servicemembers entrusted to the leaders of Navphibase Little Creek Staff and Regional Public Safety, Fire and Security builds a confidence, morale, and ultimately, mission effectiveness. Requests will be processed accordingly.

3. Policy. All special request chits are to be processed electronically according to the procedures established by this notice. The time requirements set are intended to be the maximum time required to answer the request and return it to the member. Every effort shall be made to return the chit with final approval/disapproval to the originator within three working days. If a crewmember has not received a reply within these guidelines, they may personally inform the Command Master Chief or Executive Officer directly concerning the status of the request chit. The Commanding Officer is the final disapproving authority for all request chits.

4. Procedures

a. All requests will be submitted through the individual's chain of command in accordance with enclosure (1). Beyond three working days, the following chits will be processed using the following guidelines.

(1) Career Requests: Maximum seven working days after submission.

(2) Emergency Requests: An individual submitting a request of an emergency nature should, when possible, hand carry the request through to the final approval authority.

b. Enclosure (2) is a sample print-out of an electronic chit.

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5. Action. NAVPHIBASE LCREEK/REGPUBSAFETY Department Heads/Storefront Managers and personnel under their cognizance shall:

a. Ensure compliance of enclosure (1).

b. On enclosure (1), "R" indicates recommendation authority, and "A" indicates approval/disapproval authority.

c. For request chits of an urgent or emergency nature, ensure when emailing the chit, the email message is "flagged" (click the red flag icon) and the importance is given a "high priority" (click the "!" icon) on the email prior to sending/routing through the chain of command.

6. Clarification. The following provides further clarification of requests for Single Basic Allowance for Housing (BAH) and Basic Allowance for Subsistence (BAS), also referred to as Commuted Rations (COMRATS).

a. For Single Basic Allowance for Housing (BAH):

(1) Reference (a) outlines specific guidelines.

(2) These chits must be chopped thru the chain of command AND BILLETING OFFICER before they are sent to the XO for approval/disapproval.

(3) E-1s through E-4s MUST BE COUNSELLED (Page 13) on financial responsibility prior to chit being routed. Enclosure (3) is an example of the required Page 13 entry.

(4) When this type of chit is routed electronically, Department Head/Storefront Manager should, in the text of the email, state the following (or words to this effect):

"Member meets the requirements of OPNAVINST 11103.1 Series--and (if E-1 through E-4) has been counseled on financial responsibility via Page 13 entry."

(5) The Sailor requesting BAH should NOT pursue living out in town UNTIL the chit is approved. Otherwise, if the chit is disapproved, he/she may find himself/herself having to rescind on the lease requirements.

b. For Basic Allowance for Subsistence (BAS), also referred to as Commuted Rations (COMRATS):

(1) Reference (b) outlines specific guidelines.

(2) These chits must be chopped through the chain of command (with the XO's recommendation) and then they are sent to the Food Service Officer for approval/disapproval.

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6. Cancellation Contingency. This instruction shall remain in effect until superceded by another notice of the same subject.



JAMES L. O'KEEFE III

Distribution:

NAVPHIBASELCREEK/REGPUBSAFETYINST 5216.2P

List IA, IB (1, 1A, 2, 2A, 3, 3A only), IC, ID - Case A

SPECIAL REQUEST CHIT ROUTING MATRIX

CATEGORY	LPO	CPO	LCPO	DEPT HD	REGIONAL DIRECTOR (as req'd)	BILLET OFFICER	COC	ADMIN OFFICER	CMC	XO	CO	
1-DAY SPECIAL LIBERTY	R	A										Ref: MILPERSMAN 1050-280
2-DAY SPECIAL LIBERTY	R	R	A									Ref: MILPERSMAN 1050-280
3-DAY SPECIAL LIBERTY	R	R	R	A								Ref: MILPERSMAN 1050-280
4-DAY SPECIAL LIBERTY	R	R	R	R	R					A		Ref: MILPERSMAN 1050-280
Academic Skills	R	R	R	A								
Advance Pay (12 month payback)	R	R	R	R	R				R	A		Command approval not required for E4 over 4 years requesting one month advance pay
Advance Pay (more than 12 month payback)	R	R	R	R	R					R	A	Command must approve advance pay form.
Advance Basic Allowance for Housing (BAH)	R	R	R	R	R					A		Must submit copy of lease with approved request chit to PSD.
Advanced SRB Request	R	R	R	R	R		R			R	A	
Basic Allowance for Housing/BAH (Single) Notes: (1) Ref: OPNAVINST 11103.1 series (2) E-1s through E-4s (page 13 counseling)	R	R	R	R	R	R				A		Must submit BEQ check out form or letter with approved chit to PSD
Basic Allowance for Subsistence (BAS) also referred to as Commuted Rations (COMRATS) Notes: (1) Ref: CNRMAINST 7341.1 series (2) Storefront Food Services Officer Approves	R	R	R							R		Storefront Food Service Officer (FSO) approves
Dislocation Allowance (DLA)	R	R	R	R	R					A		
Commissioning Programs	R	R	R	R	R		R		R	R	A	
Early separation from the Naval Service	R	R	R	R	R		R	R	R	R	A	
Enlisted Personnel Action Request 1306	R	R	R	R	R		R		R	R	A	
Extension on Active Duty	R	R	R	R	R		R		R	R	A	
Extension of PRD to meet EAOS	R	R	R	R	R		R		R	A		
HARP Duty	R	R	R	R	R		R		R	A		
Home Awaiting Orders Request	R	R	R	R	R		R		R	A		
House Hunting TAD	R	R	R	A								

CATEGORY	LPO	CPO	LCPO	DEPT HD	REGIONAL DIRECTOR (as req'd)	BILLET OFFICER	CCC	ADMIN OFFICER	CMC	XO	CO	
Humanitarian Reassignment/Discharge	R	R	R	R	R		R	R	R	R	A	
Leave (only if will result in negative LV balance)	R	R	R	R	R				R	A		
Lost ID Card	R	R	R	R	R			R	R	A		Must have picture ID or E5 escort along with approved request chit.
Maternity Clothing Allowance	R	R	R	A								Must submit medical statement with approved request chit.
Move in BEQ	R	R	R	R	R	A						Copy to Admin Officer
Name Change	R	R	R	R	R				R	A		
NEC Change	R	R	R	R	R		R	R		A		
Off Duty Employment	R	R	A									
Off Duty Education (Tuition Assistance)	R	R	R	A								
Permissive Temporary Duty (PTDY)	R	R	R	R	A							
Photorefractive Keratectomy (PRK) application	R	R	R	R	R				R	A	A	Copy to Admin Officer * XO approves chit ** CO signs Navy Refractive Surgery Consult Form
Notes: (1) This is ONLY a request to APPLY (2) Request chit needs Navy Refractive Surgery Consult Form (for CO sig)												
Reinstatement	R	R	R	R	R			R		R	A	
Reenlistment Request	R	R	R	R	R		R		R	R	A	Must submit CCC worksheet with approved request chit.
Request Mast	R	R	R	R	R				R	R	A	
Request for "A" School	R	R	R	R	R		R		R	A		
Retirement/Fleet Reserve	R	R	R	R	R		R		R	A		
Release from Restriction Early	R	R	R	R	R				R	R	A	
Separate at EAOS	R	R	R	R	A		R		R			PSD should be notified soonest, but no chit required.
Spouse Colocation	R	R	R	R	R		R		R	A		
TAD Request (cost)	R	R	R	R	R		R	R	R	A		
TAD Request (no cost)	R	R	R	R	A							
Terminal Leave Request	R	R	R	R	A				*	*		* For CPOs/Officers: Routed via CMC and approved by XO
												Provide copy to Admin Officer

CATEGORY	LPO	CPO	LCPO	DEPT HD	REGIONAL DIRECTOR (as req'd)	BILLET OFFICER	CCC	ADMIN OFFICER	CMC	XO	CO	
Transition Assistance Program	R	R	R	A								Notify CCC/CMC
Two POVs, same PCS Move	R	R	R	R	R				R	R	A	
Waiver of Indebtedness	R	R	R	R	R				R	R	A	Submit germane documents with waiver request form.

SPECIAL REQUEST/AUTHORIZATION
NAVPERS 1336/3 (Rev.9-75)
SN 0106-LF-063-8633

(Press TAB to move through fields or use mouse) DO NOT PRESS ENTER
(Press SHIFT+TAB to move back a field or use mouse)

PRIVACY ACT STATEMENT

The authority to request this information is contained in 5 USC 301, Departmental Regulations. The principal purpose of the information is to enable you to make known your desire for one of the four items, listed or for some other special consideration or authorization. The information will be used to assist officials and employees of the Department of the Navy in determining your eligibility for and approving or disapproving the special considerations or authorization being requested. Completion of the form is mandatory; failure to provide required information may result in delay in response to or disapproval of your request.

NAME (Last, First, middle initial)		RATE		SSN	
SHIP OR STATION				DATE OF REQUEST	
DEPARTMENT/DIVISION/WARD			DUTY SECTION/GROUP		
NATURE OF REQUEST <input type="checkbox"/> LEAVE <input type="checkbox"/> SPECIAL REQUEST <input type="checkbox"/> SPECIAL PAY <input type="checkbox"/> COMMUTED RATIONS <input type="checkbox"/> OTHER (Below)					
NO. DAYS REQUEST		FROM (Date and time)		TO (Date and time)	
DISTANCE (Miles)		MODE OF TRAVEL <input type="checkbox"/> AIR <input type="checkbox"/> TRAIN <input type="checkbox"/> BUS <input type="checkbox"/> CAR			
LEAVE ADDRESS (Street, box or route no., City, State, Zip Code)				TELEPHONE NUMBER	
REASON FOR REQUEST					
SIGNATURE OF APPLICANT:					
I AM ELIGIBLE AND OBLIGATE MYSELF TO PERFORM ALL DUTIES OF PERSON MAKING APPLICATION - SIGNATURE OF STANDBY				DUTY STATION	
PERSONNEL OFFICE					
EARNED LEAVE		DAYS AS OF:		DATE LAST PAID	
RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE AND RANK/RATE/TITLE/DATE			
<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		SIGNATURE AND RANK/RATE/TITLE/DATE			

To route request chit – Click on File, Send to, Routing Recipient – then select the persons to forward to in order and make sure you send to each in turn not all at once.

SAMPLE PAGE 13 FOR SINGLE E1-E4 BAH REQUESTS

I, _____, have received counseling from the Command Financial Specialist (CFS) regarding financial responsibility of members of the Department of the Navy.

Per MILPERSMAN 7000-020, I fully understand that failure to pay just debts or incurring debts beyond my ability to pay is evidence of irresponsibility and may jeopardize my security clearance status, assignment, qualification for reenlistment or extension of enlistment, and in aggravated circumstances, may become grounds for disciplinary action or other than honorable discharge.

I understand that any and all debts I incur as a result of moving from government quarters shall be my responsibility. I also understand that Basic Allowance for Housing (BAH) is not automatically authorized upon receiving permission to vacate government quarters. If the government housing utilization rate is less than 95 percent and BAH is not authorized at the time of vacating government quarters, I acknowledge that I must request to be placed on a waiting list for authorization to receive BAH. BAH is not normally retroactive unless special circumstances pertain.

I have completed a financial planning worksheet with the assistance of the CFS and understand that this planning document has been provided to me as a courtesy. I will not hold the preparer liable for its contents, in part or whole.

Signature

Date